

# Nursing Board News

MASSACHUSETTS BOARD OF REGISTRATION IN NURSING

Vol. 6 No. 1 □ Summer 2000

## Board Mission Statement

*The mission of the Board of Registration in Nursing is to protect the health safety and welfare of the citizens of the Commonwealth through the fair and consistent enforcement of the statutes and regulations governing nursing practice and education.*

## Board Welcomes New Members

On January 6, 2000 Governor Paul Cellucci appointed **Ann M. Montminy, MS, RN**, to the Associate Degree Educator seat on the Board of Registration in Nursing. Ms. Montminy is currently the Assistant Dean for Nursing at Middlesex Community College. She has 25 years experience in nursing education at both the LPN and Associate Degree level. Prior to joining the Board she was the curriculum consultant for the LPN and associate degree programs at Middlesex. In 1995 she was the Recipient of the Outstanding Nurse Award from the Merrimac Valley Health Education Council.

On March 3, the Governor appointed **Ellen Andrews, MSN, MHA, RN**, to serve as the Board's Practical Nurse Educator member. Prior

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## Board Continues Work on Proposed Regulations

**T**he Board thanks all those individuals and organizations who submitted testimony during the fall 1999 public hearing process regarding its proposed regulations at 244 CMR 2.00, 7.00 and 8.00. These proposed regulations outline standards of conduct for nurses, the actions the Board may take on complaints filed against a nurse's license, and the requirements for licensure by endorsement.

Over the winter and spring months, the Board carefully reviewed the testimony received (approximately 75 submissions) and considered appropriate revisions to the proposed regulations. At their May 2000 meeting, the Board members voted to approve revisions to the regulations and to extend the comment period on the revised proposed regulations from June 5<sup>th</sup> through July 5, 2000.

The Board added no new substantive provisions to the proposed regulations, clarified the

language where needed, and deleted certain provisions that were either redundant to other regulations or more appropriately addressed in policy. The language governing the summary suspension of a license at 244 CMR 7.05 was significantly revised to more explicitly articulate the nurse's due process rights.

Both the originally proposed and the revised proposed regulations can be found on the Board's web site at [www.state.ma.us/reg/rn/rul\\_reg.htm](http://www.state.ma.us/reg/rn/rul_reg.htm). As this newsletter goes to press, the June comment period is still open. The Board will promulgate the new regulations after reviewing the comments it receives and incorporating the changes it finds are needed. The new regulations and attendant policies will immediately be posted on the Board's web site and will also be available for purchase at the State House Bookstore.

The Board will offer educational workshops about the new regulations after they become effective. ■

## Ten States Enact New Licensing Model

As previously reported, the member boards of the National Council of State Boards of Nursing (NCSBN) have developed a Nurse Licensure Compact (NLC) to facilitate interstate nursing practice and regulation. This compact, simply stated, is a legal agreement between states that allows them to recognize each other's RN and LPN licenses.

This model for 'mutual recognition' is similar to the driver's license model: it allows a nurse to have one license (issued by his or her state of residency) which grants the nurse the privilege to practice in the other states that have also entered into the NLC. States join the NLC by enacting legislation. Advanced practice mutual recognition is not included in the NLC.

To date, ten states have entered into this model of mutual recognition of licensure (see map on page 4). Under mutual recognition, practice across state lines is allowed, whether physical or electronic, unless the nurse's license is under discipline or a

practice monitoring agreement that restricts interstate practice. The Massachusetts Board endorses the mutual recognition model and is planning to join the NLC. The entire text of the NLC can be viewed on the NCSBN web site at

[www.ncsbn.org/files/mutual/compact.asp](http://www.ncsbn.org/files/mutual/compact.asp)

### Impetus for Mutual Recognition

- Interstate practice is increasing. Telepractice, managed care networks and the Internet have established systems (mediums) by which an increasing number of patients receive nursing care or advice over a telephone, a video or a computer monitor.
- Substantially equivalent initial RN and LPN licensure requirements already exist across states: 50 states currently require that a nurse graduate from an accredited or approved program and pass a standardized national licensure examination (NCLEX).

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## **The Massachusetts Board of Registration in Nursing**

### **Executive Branch**

Argeo Paul Cellucci, *Governor  
Commonwealth of Massachusetts*  
Jennifer Davis Carey, *Director, Office of  
Consumer Affairs*  
William G. Wood, *Director, Division of  
Registration*

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Linda Donoghue, MPA, RN  
*Vice-Chairperson*  
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Leo Bachand, Public Member  
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Janet Dewan, MS, RN, CRNA  
Maura Flynn, LPN  
Barbara Hamm, LPN  
Barbara McCool, LPN  
Ann M. Montminy, MS, RN  
Rachel E. Tierney, PhD, RN, CS  
Anna Yoder, MS, RN, CNAA

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*Nursing Board News* is published by the  
Division of Registration,  
Board of Registration in Nursing  
Theresa M. Bonanno, Editor

### **Purpose**

The purpose of *Nursing Board News* is to  
inform licensed nurses of current nursing  
laws and regulations, Board policies and  
activities, and issues pertaining to the  
regulation of nursing practice and education.

*Nursing Board News* is the official publica-  
tion of the Massachusetts Board of Registra-  
tion in Nursing. The newsletter is mailed at  
bulk rates. Authorization is granted to  
reproduce items; acknowledgement is  
appreciated.

## **Details About “A Nursing License”**

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arie McCarthy's article on page 3 contains the principles the Board applies when reviewing any complaint and explains the rationale for the Board's action in these particular cases.

The complaints against the nurses involved in these tragic overdoses received considerable media attention following the Board's January 1999 issuance of formal charges against them.

At that time, the Board alleged that 16 nurses had not met the standard of practice in the care of patients receiving chemotherapy medications under an experimental protocol. Public commentary on these cases revealed a general lack of understanding of the Board's role and actions. To allow for fair and unbiased adjudicatory hearings on these complaints, the Board was prohibited from public discussion of them until the cases were closed. As soon as all of the cases were resolved in mid-March of this year, Ms. McCarthy submitted this piece to the *Boston Globe* to emphasize the Board's role as a consumer protection agency. This role requires the review of a nurse's practice regardless of the employment setting or employer policies.

Since the overdoses involved two different patients over a six day period, multiple nurses had either signed off or administered the wrong dose of chemotherapy, or monitored its continuous 24 hour infusion. Just days before the 16 nurses were formally charged, two other nurses involved agreed to a one-year license probation. Between June 1999 and late last year, thirteen of the nurses resolved their cases with the Board by accepting a formal reprimand. In all of the cases, the licensees retained their licenses and agreed to additional education or specialty certification.

In March 2000, the Board dismissed the still-open charges against two of the nurses, and the remaining case was closed with a formal reprimand. Resolution of these last three cases averted the formal hearing scheduled to begin on March 15th to decide their outcome. The nurse whose license was reprimanded had been directly involved in the care of both of the patients. The two nurses whose cases were dismissed received advisory letters. Each of them had monitored the IV infusion of one dose of the drugs to one patient. ■

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### **Board Welcomes New Members**

to this appointment she served two terms on the Board's Nursing Education Advisory Panel. Ms. Andrews is currently the Department Chair of the Mass Bay Community College, Practical Nurse Program and has worked in that capacity for eight years. She is a member of the Massachusetts/Rhode Island League for Nursing (MARILN) and has served as Vice President of the MARILN PN Council.

The most recent Board of Nursing appointee is **Barbara McCool, LPN**, whom Governor Cellucci named to one of the Board's three LPN seats on May 22, 2000. Ms. McCool has been a staff member at Mount Auburn Hospital since 1990, where she specializes in the care of newborns and the post partum care of mothers. She is a Certified Childbirth Educator and a Certified Lactation Specialist and volunteers at the Mount Auburn Hospital Blood Pressure and Cholesterol Screening Program. Ms. McCool is also currently employed as a per diem nurse by Olsten Healthcare Services.

### **...and Says Goodbye to Former Members**

The following individuals have recently been replaced as members of the Board.

They each contributed significantly to the Board's deliberations and progress. Although their respective terms expired in 1998, they generously continued to serve, as is allowed under the law, until a successor was appointed.

**Lorna Andrade, PhD, RN**, served from January of 1995 through December 1999. Lorna held the Board's Associate Degree Nurse Educator seat.

**Hillary Hamilton, BSN, MEd, RN**, served from January of 1995 through February 2000. She was appointed to the LPN Educator seat.

**James Little, LPN**, served from February of 1994 and continued to serve through May 2000. He was a Licensed Practical Nurse Representative.

The Board also said farewell to **Linda Salmonsén, MSN, RN**, who served from January of 1995 until late 1999 as an RN Staff Nursing member. Ms. Salmonsén's former seat is now vacant.

These dedicated professionals will be greatly missed. The Board wishes them every success in all their future endeavors

# A Nursing License

*The Boston Globe published this article by Marie B. McCarthy, Board Chairperson, on its op-ed page on March 27, 2000.*

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he Board of Registration in Nursing's decision to pursue complaints against eighteen nurses involved in the chemotherapy overdoses of two patients at the Dana-Farber Cancer Institute has generated much debate.

These patients, who were participants in a research protocol for the treatment of breast cancer, repeatedly received excessive doses of medications. One patient died shortly after the overdoses. The other suffered serious heart damage. Now that these complaints have been closed, I would like to clarify several issues.

Licensed nurses are individually responsible and accountable for their practice. This is firmly established in state Nurse Practice Laws, the American Nurses' Association's Code for Nurses, and basic nursing texts. Massachusetts law says "Each individual licensed to practice nursing in the commonwealth shall be directly accountable for [the] safety of nursing care she delivers."

Nurse advocate Suzanne Gordon in her book *Life Support* writes "Both legally and ethically, nurses are responsible for the medications and treatments they administer. Nurses are patients' last line of defense in a system that is supposed to protect patients from potentially harmful or lethal human errors." Even to those who are not nurses, professional practice is an individual responsibility.

In the Dana-Farber cases, the prescribing physician and the dispensing pharmacists were held accountable for their errors and received discipline from their respective boards of registration. Dana-Farber has rightly assumed accountability for its role in these tragic overdoses. In reviewing the nurses' actions, the Board of Nursing is fulfilling its essential public protection role: to evaluate the actions of the licensed clinicians who are within its regulatory responsibility.

The Board recognizes that taking care of patients is a multi-faceted, complex process requiring not only the safest possible systems, but also competent individuals following safe standards within those systems. When preventable errors harm patients, both the system and individuals may be at fault. Just as it is wrong to ignore the system and address only individual accountability for a preventable error, it is wrong to overlook the role of individuals in such an event.

Contrary to some reports, the Department of Public Health investigation did not exonerate the nurses. Rather, the

DPH report raised issues about the standards of nursing practice. DPH referred the matter to the Board to determine if any individual nursing misconduct had occurred.

The Dana-Farber has no legal authority to absolve nurses of their individual accountability. The Board is the single entity within Massachusetts that, on behalf of consumers, independently reviews the actions of nurses regardless of setting or employer policies.

The chemotherapy doses received by these patients were four times the amount called for in the research protocol. The standard of care requires the nurse to know that the dose of the medication given is the correct dose, regardless of the actions of other professionals, including physicians. In all instances, a nurse must know why a patient is receiving a medication as well as the proper dosage, the anticipated effects, and how and when the medication is to be administered.

Observing these basic standards is critical in any research protocol where the medication dosages often vary significantly from established and familiar dosages.

The Board's goal in evaluating any complaint is not to punish nurses but rather to protect patients. If evidence shows that a nurse committed a serious breach of a safe practice standard, the Board seeks to determine why and how, and to structure a remedy to prevent future harm. In this matter, sixteen nurses and the Board agreed to license sanctions with conditions for continuing education or specialty certification. All of these nurses may continue to practice while agreeing to fulfill the Board's requirements to promote the ongoing delivery of safe care. The Board has not taken away any nurse's license.

The Board of Nursing is comprised of twelve experienced nurses and one consumer. Free from the economic, political and prestige-seeking pressures that may taint the perspective of any organization in evaluating its own employees or systems, unbiased regulatory agencies such as the Board are best situated to examine events, systems and individual conduct based on accepted professional standards.

Licensing boards were specifically created to safeguard consumers' interests, and constitutional protections ensure they do so fairly. The Board understands and shares the public's well founded respect for and trust in nurses. The Board's action in these cases affirms the role of the nurse as an independent member of the healthcare team. Nurses' professional colleagues and their employers must recognize and support this role. Holding a nursing license imposes individual accountability. The law requires it and the public should expect no less.

## Join the Crowd Visit Our Website

The Board of Nursing website had 97,966 visitors since July 15, 1998. The website contains information including the laws and statutes related to nursing, rules and regulations, advisory rulings, the agency's physical location, and disciplinary and licensure information.

While on line you can change your mailing address directly onto the Board's licensing data base. The correct mailing address is essential for nurses to receive their licenses renewal notices and all other Board mailings. Another important feature is the ability to electronically verify the status of any RN or LPN license. This feature is very helpful to employers who routinely verify licenses on many of their nurse employees at the same time.

Once you reach your destination at <http://www.state.ma.us/reg/boards/rn> you can go to many different sites with the help of the table to the right.

Topic	Go to
Continuing Education Requirements	Rules and Regulations, Click on 244 CMR 1.00-8.00 select 5.00
Substance Abuse and Rehabilitation Program	Home Page (last item)
List of Approved Nursing Education Programs and Related Statistics	Board News, Click on From the Nursing Education Committee
Prescriptive Authority Information	Board News, Click on From the Nursing Practice Advisory Panel
Authorization to Practice as an Advanced Practice Nurse Application Form	Applications and Forms
Complaint Form	Applications and Forms
Your License Number	Check a license, Click on License Information
Information about Other Boards of Nursing	Links, Click on National Council of State Boards of Nursing
Locate a Nurse in Your Town	Services (Division), Click on Check a License

## Ten States Enact New Licensing Model

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- The endorsement process is time-consuming, duplicative, and costly.

### Advantages of the Mutual Recognition Concept

- Reduces the barriers to interstate practice
- Promotes cost effectiveness and simplicity for the licensee
- Acts as an unduplicated listing of licensed nurses
- Facilitates interstate commerce
- Improves tracking for disciplinary purposes

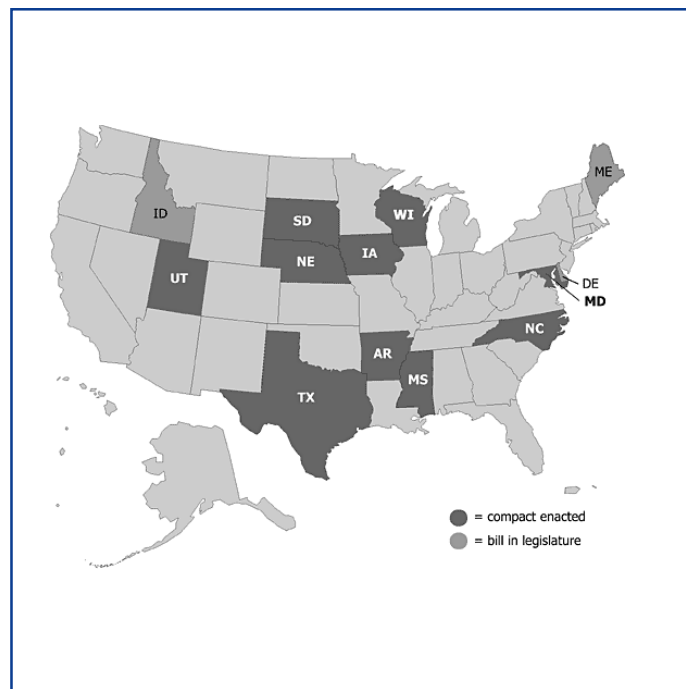
- Modernizes the regulation of practice by using the tools of the times.
- The NLC is designed to protect Massachusetts citizens. It comports with the determination that the practice of nursing, including telehealth, occurs in the state in which the patient is located. Nonresident nurses practicing via telecommunications within Massachusetts must comply with the nursing regulations set by Massachusetts.

### Issues

- Any change in NLC rules must be approved by all NLC states.
- The Massachusetts Board will not necessarily know which out-of-state nurses are practicing in Massachusetts. However, some states that have enacted the NLC have agreed to gather data from licensees regarding where they practice.

### Safeguards

- Each state at all times retains the authority to determine who may practice within its borders.
- Each state can review the licensure requirements of other states before to enacting the NLC.
- Each state retains the power to withdraw from the NLC.
- Each state retains the authority to limit or revoke a nurse's privilege to practice within its borders.
- The nurse's due process rights are observed. The Massachusetts Board will conduct its own complaint investigations and will apply the facts of any complaint to nursing-related statutes and discipline regulations.
- The NLC specifies that information that is not public under state law does not become public by sharing it with the data bank.
- Basing licensure on state of residence instead of state of practice is preferred because of the very difficult implementation problems related to nurses practicing in multiple states. ■





# Good Moral Character Policy Revised



he Board of Registration in Nursing has revised its policy regarding the “good moral character” licensure requirement at MGL c. 112, ss. 74, 74A and 76. The new policy, Initial Nurse Licensure by Examination or Endorsement: Determination of Good Moral Character, specifies certain conduct and convictions for which the Board believes initial licensure as a nurse, and the resultant access to vulnerable populations, poses an unacceptable risk to the public. The policy became effective January 1, 2000.

The law requires that all applicants for initial nurse licensure be of “good moral character.” The Board determines whether an applicant meets this requirement based on the applicant’s demonstrated avoidance of aggressive, unjust and deceitful behavior. The Board evaluates an individual whose conduct has demonstrated aggression, injustice and deceit, as evidenced by one or more criminal convictions to determine whether the conduct

- poses a threat to public safety;
- is of significance to the provision of safe, effective nursing care; and/or
- is characteristic of the applicant’s conduct.

## Exclusion from Licensure

The new policy permanently excludes certain applicants from licensure. The Board has identified those conducts that pose an unacceptable risk to public safety and to the provision of safe, effective nursing care. Any applicant who has engaged in such conducts will be determined to lack the “good moral character” required for licensure and will be excluded. The exclusionary conducts include:

1. submission of false information on an application for licensure which is directly related to the qualifications for licensure;
2. cheating on the National Council Licensure Examination (NCLEX); or
3. those underlying certain felony convictions including, but not limited to

- a list of identified egregious crimes including murder, rape, aggravated sexual assault, assault with intent to rape, armed assault with intent to murder, kidnapping, burning a building, administering drugs to obtain sex, and others
- any violent crime against a person(s) exhibiting intentional or deliberate, extreme disregard of human life;
- any sexual crime; or any crime involving trafficking in, or illegally manufacturing, controlled substances

## Key points of new policy

- *It specifies the conduct and convictions which the Board considers an unacceptable risk to the provision of safe, effective nursing care, and therefore exclude an individual from nurse licensure by examination or endorsement.*
- *It identifies the conduct and convictions which the Board considers may pose an unacceptable risk to the provision of safe, effective nursing care, and therefore may exclude an individual from nurse licensure by examination or endorsement.*
- *Establishes a mandatory period of time (a minimum of five (5) years) prior to the submission of a license by examination or endorsement application in which the applicant must be conviction free and have successfully completed all court-ordered stipulations.*

## Potential Exclusion from Licensure

The Board has determined that certain other conducts by an applicant pose a potential risk to public safety and/or to the provision of safe, effective nursing care. Such conducts include those underlying:

1. convictions for any other felony or misdemeanor involving crimes against persons or property and which demonstrates a risk of harm to patients’ health, safety and/or welfare or is likely to

infringe on the applicant’s ability to safely practice nursing; or

2. convictions on three (3) separate occasions, irrespective of the nature of the crimes.

The Board will evaluate each licensure application involving criminal convictions, including those potentially excluding an applicant from licensure, on a case by case basis. Factors considered include, but are not limited to, the date of the criminal conviction, the age of the applicant at the time of the conviction, the nature and number of the crime(s), and rehabilitation.

The new policy states that the licensure applicant must have had no criminal convictions for a minimum of five (5) years before the date of submission of the license application. Additionally, the applicant must have successfully completed all court-ordered stipulations a minimum of one (1) year before the applicant will be considered for licensure by the Board.

Licensure applicants whom the Board determines not to have met the “good moral character” licensure requirement are not eligible for licensure. The Board will specify in writing the circumstances, if any, under which an applicant denied licensure may be considered sufficiently rehabilitated and of “good moral character” and thus eligible for reconsideration of the licensure application.

Where the Board denies an applicant initial licensure on the basis of the foregoing, the applicant will be advised of her or his right to dispute the Board’s determination of denial.

*The Board’s deliberations in the development of this policy were guided by a review of relevant literature, a retrospective audit of initial licensure applicants with criminal convictions, a comparative analysis of crimes appearing on the Executive Office of Health and Human Services Mandatory Disqualification List and the Massachusetts Sentencing Commission Master Crime List, a review of the National Council of State Boards of Nursing Disciplinary Data Bank, and a survey of other state nursing boards about their policies. In addition, the Board consulted with staff of the Massachusetts Criminal History Systems Board and the Massachusetts Executive Office of Health and Human Services. ■*

# Nursing Student Enrollment Declines

The Board of Registration in Nursing recently reviewed the 1999 students' statistics as submitted by the state's pre-licensure nursing education programs in their annual reports. Another annual decline is seen for total RN and LPN admissions, graduates and enrolled student numbers, while an increase is noted for the generic Master Degree/RN students' statistics.

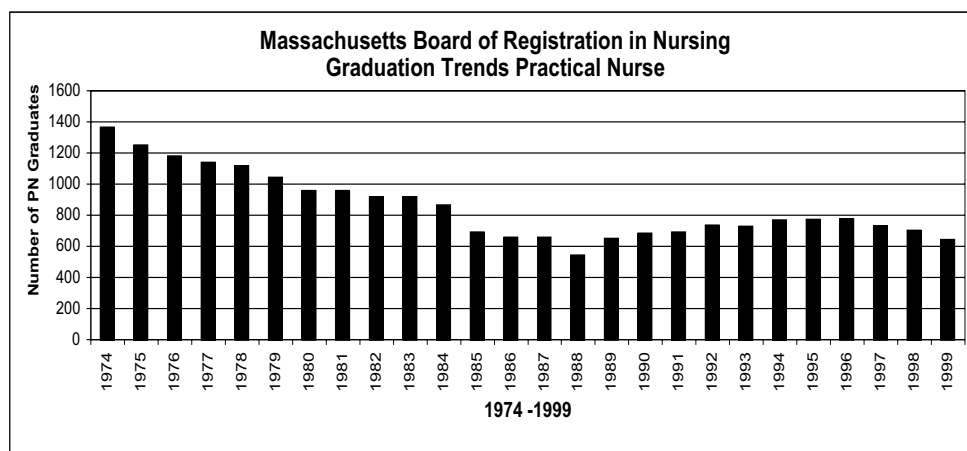
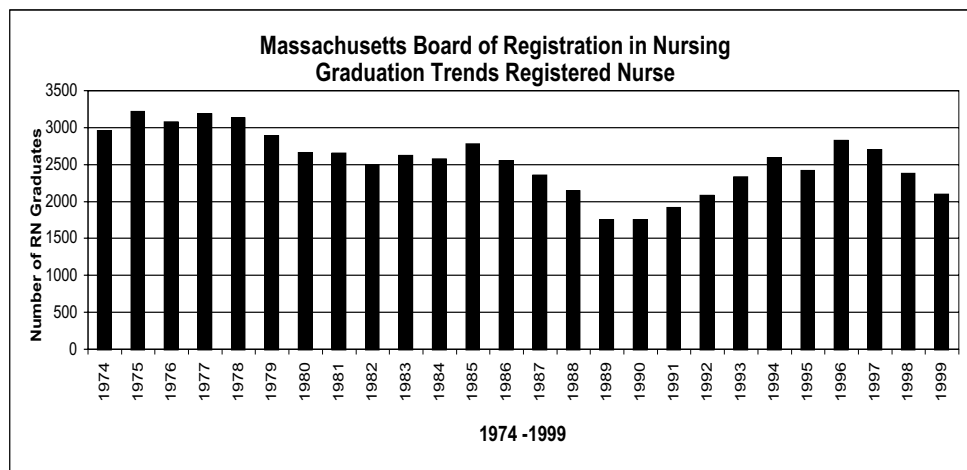
Based on the current decrease in the number of admissions to nursing programs and the cyclical nature of nursing program graduation trends, the Board predicts a further decline in Massachusetts nursing graduates. This will result in fewer new nurses.

To further compound the decreasing supply of newly licensed nurses in the near future, NCLEX (the National Council Licensing Examination for RNs and LPNs) pass rates are on the decline. The diminishing number of first time Massachusetts's graduates passing the licensing exam is comparable to national numbers and pass rates.

The Board is publishing this data for both Registered Nurse and Practical Nurse programs for the academic years 1973-1974 through 1998-99 in an effort to raise awareness and start an exchange of ideas related to the significance of such a decrease on the health, safety and welfare of the citizens of the Commonwealth.

The Board is an active participant in a revitalized consortium of Massachusetts nursing leaders to develop and implement a statewide strategic nurse workforce plan. This collaborative effort is in conjunction with the Massachusetts Colleagues in Caring project and is administered through the Center for Health Professions at Worcester State College.

For detailed information on Massachusetts nursing program admissions, graduates and enrollment annual statistics, visit the Board's web site at [www.state.ma.us/reg/boards/rn](http://www.state.ma.us/reg/boards/rn).



## FIRST TIME CANDIDATES NCLEX PASSING TRENDS

	MASSACHUSETTS Educated in Massachusetts			NATIONAL Educated in US		
	Number Tested	Number Passing	Percent Passing	Number Tested	Number Passing	Percent Passing
<b>RN</b>						
1999	2,053	1,742	85%	76,523	64,882	85%
1998	2,342	2,006	86%	83,171	70,711	85%
1997	2,601	2,258	87%	89,462	78,539	88%
1996	2,791	2,429	87%	94,179	82,876	88%
1995	2,574	2,353	91%	96,447	87,182	90%
<b>LPN</b>						
1999	649	567	87%	37,372	32,260	86%
1998	720	650	90%	40,075	34,994	87%
1997	708	645	91%	42,997	38,136	89%
1996	774	737	95%	42,974	38,897	91%
1995	758	719	95%	45,952	41,698	91%

# Summary of Board Activities FY99

The volume of certain Board of Registration in Nursing activities for FY99 (July 1, 1998 through June 30, 1999) is listed. To show the extent of annual increases and decreases in these activities, FY98 statistics and percent variance are also listed.

	FY 99	FY 98	Variance
<b>Number of Licensees</b> (as published on Web-Division)			
RNs	105,820	103,898	2%
LPNs	22,701	23,103	-2%
Advanced Practice RNs*			
Nurse Practitioners	3,798	n/a	
Nurse Midwives	384	n/a	
Nurse Anesthetists	798	n/a	
Psychiatric Clinical Specialists	885	n/a	
<b>NCLEX Statistics</b>			
RNs	2,113	2,611	-19%
LPNs	678	782	-13%
<b>Total</b>	<b>2,811</b>	<b>3,393</b>	<b>-17%</b>
<b>License Endorsements</b>			
RNs	1,739	1,786	-3%
LPNs	191	185	3%
<b>Total</b>	<b>1,930</b>	<b>1,971</b>	<b>-2%</b>
<b>License Verifications</b>			
	4,995	4,491	11%
<b>Advanced Practice Authorizations</b>			
Nurse Practitioner	447	425	5%
Nurse Midwife	30	32	-6%
Nurse Anesthetist	41	41	0%
Psychiatric Clinical Specialist	57	36	58%
<b>Total</b>	<b>575</b>	<b>534</b>	<b>8%</b>
<b>Nursing Education Programs</b>			
BSN and Higher Degree	16	16	
Associate Degree	21	20	
Diploma	3	6	
Practical Nursing	21	23	
<b>Total</b>	<b>63</b>	<b>65</b>	<b>-3%</b>
<b>SARP Activities</b>			
Participants - Monthly Average	95	82	16%
Admissions	38	34	12%
Discharges	19	17	12%
Withdrawals/Terminations	9	11	-18%
<b>Complaint Activities</b>			
Dismissals	262	207	27%
Probations	70	27	159%
Loss of License Actions**	67	58	16%

## Number of Licensees

The total number of nurses holding current Massachusetts RN and LPN licenses, and the total number, by category, of RNs holding advanced practice authorizations

## NCLEX Statistics

The number of RN and LPN candidates who passed the National Council Licensing Examination and were issued initial licenses to practice nursing in Massachusetts

## Endorsements

The number of RN and LPN licenses issued by endorsement (without examination) to nurses issued a nursing license in another U. S. jurisdiction

## Verifications

The number of Certified Statements of Licensure issued to verify that an individual holds or has held a Massachusetts RN or LPN license

## Advanced Practice Authorizations

The number of new Advanced Practice Authorizations, listed by the four approved categories, issued to qualified RNs. There was a significant increase (58%) in the number of newly authorized nurse anesthetists.

## Nursing Education

The number of approved RN and LPN education programs in the Commonwealth that prepare students for initial licensure

## SARP Activities

Statistics for the Board's Substance Abuse Rehabilitation Program (SARP), including the average number of active participants each month, the number of nurses newly admitted to the SARP (admissions), the number of nurses who successfully completed the Program by demonstrating five years of ongoing recovery (discharges), and the number of nurses who left the Program without successful completion (withdrawals/terminations)

## Complaint Activities

The number of complaint files closed by the Board listed by outcomes including: dismissal of the complaint due to lack of jurisdiction, insufficient evidence or an allegation that did not warrant discipline; license probations where the license was sanctioned but the nurse was allowed to continue to practice under certain conditions or stipulations; and loss of license sanctions where the nursing license was deemed no longer valid and the nurse was prohibited from continued practice and representation as a licensed nurse. There was an overall increase in the number of complaints closed by all types of outcome, with the most significant increase (159%) in the number of licenses being placed on probation. The increase is related to additional personnel and revised procedures.

\* included in number of RNs, FY98  
statistics not available

\*\*License Suspension, Surrender or Revocation

## Disciplinary Actions

The Board publishes the disciplinary actions it has imposed, and the probation and surrender agreements it has negotiated, as part of its duty to inform the public about nurses who have had action taken against their licenses. The Board is committed to the philosophy that the public, including consumers, nurse employers, and other nurses, have not only a right to know, but a need to know, which nurses' licenses have been disciplined because of patient abuse, substance abuse, felony convictions, substandard practice, or other violations of laws or regulations.

Specifics included in the disciplinary actions listed below are: the nurse's name; type of license (RN or LPN) and the license number; town of record; the Board's docket number; the type, length and effective date of the sanction; and the violation(s) for which the sanction was imposed. Anyone wishing further information may contact the Division of Registration's Office of Investigations at 727-7406 after 2 p.m., Monday through Friday.

**A**fter an opportunity for a formal hearing in each matter, the Massachusetts Board of Registration in Nursing has imposed disciplinary action against the licenses of the following individuals:

**Janet Barros**, LPN 42032  
Jamaica Plain, MA  
LN-97-029, LN-96-314. Right to renew revoked, effective 12/28/99. Criminal convictions of multiple offenses.

**Samuel Bitar**, RN 142353  
Southington, CT  
RN-97-095. Right to renew revoked, effective 12/28/99. Action by the CT Board for sexual misconduct and furnishing false information on an application for state employment.

**Theresa Camara**, LPN 45942  
Worcester, MA  
LN-94-160, LN-95-034, LN-96-166. Right to renew revoked for a minimum of 3 years, effective 12/30/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Demary, Deborah**, LPN 41514  
Pittsfield, MA  
RN-97-019, LN-96-064. License revoked, effective 6/11/99. Larceny of a controlled substance.

**Sandra Evergates**, RN 82814  
Clinton, MA  
RN-97-206. Right to renew revoked for 5 years, effective 8/2/99. Uttering prescriptions.

**Gale Frawley**, RN/NA 120201  
Dover, MA  
RN-97-040. RN license and NA

authorization revoked for a minimum of 5 years, effective 9/20/99. Criminal convictions of multiple offenses.

**Catherine Gormley**, RN 198003  
Newton, MA  
RN-97-072. License revoked, effective 8/2/99. Action by the WA Board for substance abuse.

**Malora Hackett**, LPN 28529  
East Falmouth, MA  
RN-97-060. License revoked for 4 years, effective 8/2/99. Unlicensed practice.

**Lori Hutchings**, LPN 48423  
Medford, MA  
LN-96-103, LN-96-293. Right to renew revoked for a minimum of 3 years, effective 12/30/99. Termination from the Board's Substance Abuse Rehabilitation Program, engaged in nursing practice under an expired license.

**Maureen Kennedy**, RN 181703  
Hanson, MA  
RN-95-236. License revoked for a minimum of 2 years, effective 8/2/99. Criminal conviction of larceny.

**Christine LaRose**, LPN 50449  
Watertown, MA  
LN-96-132, LN-97-017. License revoked for a minimum of 3 years, effective 12/20/99.

Improper documenting, charting and dispensing of controlled substances, falsified entries on patient records, engaged in 'doctor shopping' to obtain large volumes of controlled substances without documented medical necessity.

**Janet Manning**, LPN 50141  
Westbrookfield, MA  
LN-96-124. Probation for 1 year, effective 6/1/99. Failure to administer medications she documented as being administered.

**Christine McNulty**, RN 196386  
Lowell, MA  
RN-95-224. License revoked for a minimum of 3 years, effective 6/13/99. Felony convictions, drug abuse.

**Beth Pantazi**, RN 121367  
Norfolk, MA  
RN-94-183. Right to renew revoked for a minimum of 3 years, effective 8/2/99. Failure to properly document the administration of controlled substance, and substance abuse.

**Carol Reimer**, LPN 55746  
Norman, OK  
LN-98-060. Right to renew revoked, effective 6/11/99. Action by the OK Board for misappropriation or misuse of drugs/alcohol.

**Dennis Smith**, RN 224073  
Revere, MA  
RN-97-236. License revoked for a minimum of 3 years, effective 12/28/99. Knowingly made false statement on an application for endorsement, convictions for abuse of alcohol and other substances.

**Denise Tancrede**, LPN 55877  
Harrisville, RI  
LN-97-072. Right to renew revoked, effective 6/11/99. Action by the RI Board for unsafe practices relating to medication administration.

**Ricki Testa**, LPN 37858  
Boston, MA  
LN-98-035, LN-98-059, LN-98-114, LN-99-045, LN-99-046. License revoked effective 4/3/00. Diversion of controlled substances and falsifying information.

**By Mutual Agreement** with the Board, disciplinary action has been taken against the following licenses:

**Shelly Autor**, RN 169363  
Great Falls, VA  
RN-96-309. Formal reprimand, effective 9/8/99. Admission to

sufficient facts to find failure to adhere to standards in the administration of medication.

**Michael Binari**, RN 163542  
Somerville, MA  
RN-98-050. Probation for 3 years, effective 10/29/99. Reporting and documenting that he completed patient treatment procedures that he did not perform.

**Danele Bishop**, LPN 50485  
Dudley, MA  
LN-98-121. Probation for 2 years, effective 9/15/99. Unprofessional and inappropriate behavior with patients and co-workers.

**Susan Blanchard**, RN 126086  
Salem, MA  
RN-99-117, RN-99-239. Surrender for 3 years, effective 3/9/00. Failure to appropriately document controlled substances and signed out excess medications from Pyxis machine.

**Cynthia Brown**, LPN 57273  
Hull, MA  
LN-98-079. Probation for 1 year, effective 6/21/99. Administered morphine sulfate without verifying MD's orders.

**Christine Cabral**, RN 106964  
Fall River, MA  
RN-95-040. Surrender for 3 years, effective 3/8/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Gerard Casavant**, RN 224598  
Hoosick, NY  
RN-98-190. Probation for 1 year, effective 2/16/99. Failure to adequately assess and care for a medically compromised patient.

**Margaret Chappell**, LPN 38019  
South Boston, MA  
RN-96-175. Probation for 1 year, effective 5/12/99. In resolution of a previous surrender agreement.

**Linda Clad**, RN 195566  
Palmer, MA  
RN-99-040. Probation for 1 year, effective 9/27/99. Failure to provide appropriate and adequate care to a diabetic home care patient.

**Linda Click** RN 206997  
Framingham, MA.  
RN-98-242, RN-99-125. Surrender for 3 years, effective 6/6/99. Termination from the Board's



## Disciplinary Actions

Substance Abuse Rehabilitation Program.

**Marie Content**, LPN 57687  
Roslindale, MA  
LN-97-047. Probation for 1 year, effective 6/30/99. Failure to document 88 medications and treatments.

**Patricia Costas**, RN 230206  
Medford, MA  
RN-99-018. Probation for 6 months, effective 2/10/99. Failure to adhere to standards of practice in the administration of medication.

**Aleta Costopoulos**, RN 226039  
Westboro, MA  
RN-98-230, RN-99-036, RN-99-080. Surrender for 3 years, effective 5/13/99. Improper documentation of controlled substances.

**Mary Cowell**, RN 146791  
Mansfield, MA  
RN-96-301. Formal reprimand, effective 8/18/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Moon Hee Cozzens**, RN 140516  
Haverhill, MA  
RN-99-104. Indefinite surrender, effective 1/28/00. Failure to adhere to standards of practice while caring for a multi handicapped child.

**Gail Crosby**, RN 152296  
Burlington, MA  
RN-99-235. Indefinite surrender of the right to renew, effective 9/13/99. Impaired practice.

**David Crowley**, RN 197722  
Braintree, MA  
RN-94-095. Surrender for 3 years, effective 2/24/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Paula Czepiel**, LPN 16474  
Worcester, MA  
LN-99-044. Probation for 1 year, effective 9/16/99. Failed on numerous occasions to adhere to applicable standards of nursing practice in the clinical care and treatment of patients.

**Sandra Demand**, LPN 58441  
Haverhill, MA  
LN-99-056. Probation for 1 year, effective 7/12/99. Unprofessional conduct with a patient.

**Marielle Desir**, LPN 56165  
Mattapan, MA  
LN-99-034. Probation for 6 months, effective 4/18/00. Failure to respond appropriately to information about changes in the condition of a patient.

**Christin DiCicco**, RN 197796  
Hingham, MA  
RN-96-297. Formal reprimand, effective 8/18/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Lisa Diflamini**, RN 217658  
Norwood, MA  
RN-97-224. Probation for 1 year, effective 5/3/99. Failure to follow proper nursing practice in the administration and documentation of medications.

**Heidi DiPetro**, RN 186233  
Portsmouth, NH  
RN-96-306. Formal reprimand, effective 8/18/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Diane DiPietro**, LPN 38671  
Holyoke, MA  
LN-98-050. Probation for 1 year, effective 4/21/99. Failure to adhere to standards of practice in the administration of an injection.

**Ellin Doherty**, RN 117165  
Lynn, MA  
RN-98-095. Surrender for 3 years, effective 8/26/98. Diversion of controlled substances.

**Deborah Dunmire**, RN 160535  
Medford, MA  
RN-98-233. Probation for 6 months, effective 8/3/99. Unlicensed practice.

**John Edmunds**, RN/NA 91110  
Londonderry, NH  
RN-99-243, RN-94-114. Surrender of the right to renew for 3 years, effective 8/6/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Debra Ferreira**, LPN 48416  
Taunton, MA  
LN-98-096. Probation for 1 year, effective 6/23/99. Practicing nursing without a valid license.

**Susan Foran**, LPN 47710  
Holyoke, MA

LN-99-026. Surrender for 3 years, effective 5/3/99. Failure to adhere to standards of practice in the documentation of controlled substances.

**Jean Ford**, LPN 44394  
Springfield, MA  
LN-99-047. Indefinite surrender effective 9/3/99. Failure to adhere to standards of practice in documenting medications.

**Michael Forni**, RN 231091  
Hampden, MA  
RN-00-253. Surrender for 3 years, effective 4/30/00. Termination from the Board's Substance Abuse Rehabilitation Program.

**Ann Gauthier**, LPN 54923  
Turners Falls, MA  
LN-99-035. Probation for 1 year, effective 7/12/99. Failure to adhere to standards of practice in administering insulin to an unresponsive diabetic patient.

**Mary Beth Graham**, RN 225952  
Brentwood, NH  
RN-99-149, RN-99-176. Surrender for 3 years, effective 4/30/00. Termination from the Board's Substance Abuse Rehabilitation Program following voluntary withdrawal.

**Donald Granger**, RN 207431  
Castleton, NY  
RN-99-118. Surrender for 3 years, effective 9/22/99. Failure to maintain appropriate boundaries with two patients.

**Janice Healy**, LPN 59437  
Worcester, MA  
LN-99-066. Probation for 1 year, effective 7/13/99. Failure to adhere to standards of practice in documentation of controlled substances.

**Andrew Higgins**, LPN 51496  
Sheffield, MA  
LN-98-021, LN-99-055. Surrender for 5 years, effective 11/10/99. Drug diversion and improper documentation of controlled substances.

**Leon Hitchcock**, RN 165143  
San Antonio, TX  
RN-99-166. Indefinite surrender, effective 9/13/99. Action by TX Board, surrender of nursing license.

**Nancy Hopkins**, RN 165170  
Taunton, MA  
RN-96-296. Formal Reprimand effective 8/10/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Donna Joseph**, RN 173509  
Quincy, MA  
RN-97-253. Formal reprimand, effective 8/12/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Janet Kelley**, RN 108825  
Salem, MA  
RN-99-100. Surrender for 3 years, effective 5/5/99. Uttering false prescriptions, and fraudulently obtaining drugs.

**James Laferriere**, RN 184262  
Providence, RI  
RN-00-093. Indefinite surrender, effective 3/28/00. Grand jury indictment on criminal charges of sexual assault on a patient.

**Geraldine Lanagan**, RN 68973  
Mattapoisett, MA  
RN-99-180. Surrender for 3 years, effective 10/6/99. Drug diversion.

**Carol Lavelle**, RN 76722  
Holyoke, MA  
RN-99-071. Probation for 1 year, effective 2/18/00. Failure to adhere to standards of practice for disposal and destruction of controlled substances.

**Rolf Ludwig**, RN 170917  
Piermont, NH  
RN-96-299. Formal reprimand, effective 8/18/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Gail McGowan**, RN 110245  
Franklin, MA  
RN-99-096, RN-93-028. Surrender for 3 years, effective 6/22/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Sally McKeon**, LPN 32764  
North Adams, MA  
LN-99-119. Surrender for 3 years, effective 9/15/99. Attempted diversion of Ativan for own use.

**Kelly McNeill**, RN/NP 180168  
Natick, MA  
RN-97-272. Formal reprimand,

## Disciplinary Actions

effective 9/8/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Michael Maille**, RN 201678

Dracut, MA

RN-97-213. Surrender for 1 year, effective 7/16/99. Illegal possession of Class D substance.

**Annette Mercier**, LPN 58758

Belchertown, MA

LN-98-084. Probation for 1 year, effective 6/15/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of a tube feeding.

**Carol Merrifield**, RN 123379

Rockland, MA

RN-96-184. Surrender for 3 years, effective 7/12/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Evelyn Michael-Leonard**, LPN 55692

Pownal, VT

LN-98-123. Probation for 1 year, effective 4/8/99. Failure to adhere to standards of practice by failing to document the assessment of a patient in a timely manner.

**Irene Milonopoulos**, RN 231584

Boston, MA

RN-98-127. Probation for 2 years, effective 4/20/99. Practiced nursing without a license before passing the NCLEX exam.

**Maria Minks Wadsworth**, RN 164471

Natick, MA

RN-97-254. Formal reprimand, effective 8/13/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Mary Moore**, RN/NM 210862

Gallup, NM

RN-99-102. Probation for 3 years, effective 8/9/99. Failure to adhere to standards of practice as a nurse midwife in the monitoring, assessment and evaluation of a pregnant patient and her fetus during labor and delivery.

**Patricia Mulkerrins**, RN 198475

Boston, MA

RN-98-235. Probation for 1 year, effective 4/5/99. Failure to adhere to standards of practice in the

administration of controlled substances. License surrendered on 1/16/00 for failure to adhere to requirements of probation agreement.

**Maura Murray**, RN 172561

East Sandwich, MA

RN-97-255. Formal reprimand, effective 3/14/00. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Suzanne O'Brien**, RN 135286

Watertown, MA

RN-98-175. Probation for 3 months, effective 4/13/99. Failure to adhere to standards of practice in her role as Director of Nursing to assure quality nursing practice.

**Judith Occhipinti**, RN 217555

Newton, MA

RN-98-216, RN-98-201, RN-98-215. Surrender for 3 years, effective 5/11/99. Failure to adhere to standards of practice in the documentation of controlled substances.

**Bernadette O'Connor**, RN 177904

Braintree, MA

RN-98-152. Probation for 2 years, effective 7/2/99. Documented administering controlled substance to a patient who denied receiving the drug.

**Virgilio Ortiz**, RN 192988

West Roxbury, MA

RN-98-059. Probation for 1 year, effective 10/18/99. Failure to adhere to standards of practice in the administration of medication.

**David Owen**, RN 132314

Gardner, MA

RN-98-227. Surrender for 3 years, effective 4/22/99. Failure to respect a patient's rights by improperly and forcefully administering medication to the patient.

**David Packard**, LPN 50042

Harvard, MA

RN-97-059. Probation for 1 year, effective 5/26/99. Failure to adhere to standards of practice in the administration and documentation of medication.

**Lisa Parizeau**, RN 229089

Wellesley, MA

RN-99-012. Probation for 6 months, effective 4/21/99. Failure to adhere to standards of practice when signing off a medication order.

**Joseph Parker**, RN 215637

Framingham, MA

RN-99-215. Surrender for 3 years, effective 9/27/99. Removal of Ritalin from facility without authorization.

**Djovany Pierre**, LPN 56812

Dorchester, MA

LN-99-024. Probation for 1 year, effective 2/12/99. Failure to respond appropriately during a medical emergency.

**Sandra Pine**, RN 113516

Roslindale, MA

RN-97-112. Probation for 1 year, effective 6/30/99. Diversion of controlled substances.

**Aaron Pokke**, RN 191931

Templeton, MA

RN-96-192. Surrender for 3 years, effective 9/17/99. Admission to drug related misconduct.

**Karen Poreda**, RN 127391

Westwood, MA

RN-96-305. Formal reprimand, effective 6/24/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Barbara Rafferty**, LPN 49806

Auburn, MA

LN-98-074. Probation for 1 year, effective 2/1/00. Failure to provide safe nursing care in accordance with standards of nursing practice.

**David Rees**, RN 218398

Coventry, Great Britain

RN-98-018. Indefinite surrender, effective 8/6/99. Failure to appropriately assess and respond to a diabetic patient who exhibited signs of hypoglycemia.

**Danette Remy**, LPN 24501

Worcester, MA

LN-98-022. Surrender for 15 months, effective 7/6/99. Diversion of non-narcotic prescriptions for own use.

**Virginia Riordan**, LPN 53329

Braintree, MA

LN-98-117. Probation for 1 year, effective 6/18/99. Failure to

adhere to standards of practice in the administration of medication.

**Wendy Roberts**, RN 127902

Andover, MA

RN-98-079. Surrender for 3 years, effective 4/24/00. Termination from the Board's Substance Abuse Rehabilitation Program.

**Eileen Rogers**, LPN 32178

Whitman, MA

LN-98-094. Probation for 2 years, effective 4/6/99. Administered an incorrect medication to a patient and left the facility during her assigned shift without notifying her supervisor or obtaining authorization.

**Gawaine Ross**, LPN 52432

Marlboro, MA

LN-97-037. Probation for 2 years, effective 3/30/99. Falsification of a patient's blood sugar results and failed to provide proper nursing care.

**Shelia Rozanski**, RN 196222

Framingham, MA

RN-98-023. Formal reprimand, effective 6/16/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Josephine Ryan**, RN 117939

Northampton, MA

RN-99-169. Probation for 2 years, effective 9/9/99. Engaged in the unlicensed practice of nursing.

**Sally Sarabia**, RN 133494

Quincy, MA

RN-98-234. Probation for 3 months, effective 6/28/99. Failure to adhere to standards of practice in her role as Director of Nursing by not assuring proper orientation for a newly employed staff nurse.

**Margaret Scanlon**, LPN 31375

Quincy, MA

LN-96-048. Surrender for 3 years, effective 4/13/98. Impaired practice.

**Patricia Serrecchia**, RN 103356

North Reading, MA

RN-95-182. Surrender for 3 years, effective 5/3/99. Termination from the Board's Substance Abuse Rehabilitation Program.

**Carolann Smathers**, RN 181399

Billerica, MA

RN-93-055. Probation for 1 year, effective 9/15/98. Failure to

## Disciplinary Actions

adhere to standards of practice in documentation, improper delegation of medication administration to unlicensed personnel.

**Nancy R. Smith**, LPN 17297  
Ipswich, MA  
LN-98-061. Probation for 2 years, effective 5/12/99. Failure to adhere to standards of nursing practice.

**Leslie Spencer**, RN 160313  
Franklin, MA  
RN-96-304. Formal reprimand effective 6/16/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

**Lisa Spinola**, LPN 60103  
New Bedford, MA  
LN-99-124. Probation for 2 years, effective 2/11/99. History of closed criminal convictions.

**Jennie Spradlin**, RN 175856  
Morrisville, VT  
RN-00-068. Indefinite surrender of the right to renew, effective 1/31/00. Action by the VT Board based upon unprofessional conduct.

**Sherrie Taylor**, RN 174638  
Millis, MA  
RN-99-192. Indefinite surrender, effective 10/22/99. Delegation of

medication administration to unlicensed personnel.

**Wendy Thatcher**, RN 217067  
South Dennis, MA  
RN-99-228, RN-99-209, RN-99-038, RN-98-004. Surrender for 3 years, effective 12/28/99. Percocet diversion, uttering false prescriptions, sentenced to court ordered probation.

**Loretta Wadsworth**, RN 83718  
Hudson, NH  
RN-99-136. Indefinite surrender of right to renew, effective 7/2/99. Action by the NH Board.

**James Wilkinson**, RN 228117  
Salem, MA  
RN-00-075. Surrender for 3 years, effective 2/10/00. Impaired practice, drug diversion, driving under the influence.

**Leyla Wilson**, RN 227254  
Framingham, MA  
RN-99-266. Surrender for 3 years, effective 3/31/00. Arrested for forgery and uttering.

**Robyn Woodward**, RN 170406  
Charlton, MA  
RN-96-300. Formal reprimand, effective 6/16/99. Admission to sufficient facts to find failure to adhere to standards of practice in the administration of medication.

Following satisfactory compliance with terms of discipline, the Board has **terminated the disciplinary action previously taken** against the following licenses and published in an earlier issue of *Nursing Board News*:

**Andrea Cardwell**, LPN 24011  
Lynn, MA  
RN-95-222. Probation terminated, effective 8/2/99.

**Christine Heath**, RN 214012  
Chicopee, MA  
RN-98-025. Probation terminated, effective 8/17/99.

**Priscilla Klier**, LPN 34541  
Methuen, MA  
RN-94-021. Probation terminated, effective 5/7/99.

**Patricia Lambert**, LPN 48549  
Chicopee, MA  
LN-96-249. Probation terminated, effective 5/21/99.

**Nina Lapine**, RN/NP 127939  
Middleton, MA  
RN-93-170. Probation terminated, effective 5/27/99.

**Ellen Middleton**, LPN 58716  
Danvers, MA  
LN-98-026. Probation terminated, effective 6/1/99

**Suzanne O'Brien**, RN 135286  
Watertown, MA  
RN-98-175. Probation terminated, effective 7/26/99.

**Karen Poellnitz**, RN 124327  
Framingham, MA  
RN-96-317. Probation terminated, effective 8/5/99.

**Carolann Smathers**, RN 181399  
Billerica, MA  
RN-93-055. Probation terminated, effective 10/8/99.

### Special Note

Information about nurses who are participants in the Board's Substance Abuse Rehabilitation Program (SARP) is **not** included in this disciplinary actions list. Since the SARP is an alternative to discipline, disciplinary action is not taken while the nurse remains in good standing with the SARP. If a nurse elects to leave the SARP, or is discharged from the Program for cause, the Board may subsequently take disciplinary action against the nurse's license.

## New Data Bank Combats Fraud and Abuse

A new national data bank, the federal Healthcare Integrity and Protection Data Bank (HIPDB), became operational last fall. It was created under the Health Insurance Portability and Accountability Act of 1996 to combat fraud and abuse in health care insurance and health care delivery.

All boards of nursing and other professional licensing agencies are now required to report to HIPDB any disciplinary actions taken against the license of a health care provider, supplier or practitioner. In addition, licensing agencies were required to submit historical reports of all disciplinary actions taken since August 1996. Only authorized users will have access to HIPDB.

For additional information, you may visit the HIPDB web site at <http://www.npdb-hipdb.com>

## Staff Transitions

**Cornelia Borden RN**, joined the Board staff in 1999 to serve as the Substance Abuse Rehabilitation Program (SARP) Coordinator. Ms. Borden brings more than 20 years experience in psychiatric and substance abuse nursing to her position with the Board.

The SARP was established in 1989 to assist nurses with alcohol and drug problems and had been previously developed and managed by **Daryl Devoto, MS, RN**, who retired last year. The SARP serves as a voluntary alternative to the disciplinary process.

The Board deeply regrets the resignation of **Bette Lindberg, MS, RN**, who served as Nursing Practice Coordinator for more than 8 years and most recently had served as the Board's Associate Director. Ms. Lindberg was promoted to the position of Executive Director of the Boards of Allied Health within the Division of Registration.



# You're Invited!

All Board meetings are open to the public and convene on the second Wednesday of every other month. Additional meetings may be called as needed. Meetings routinely begin at 9 a.m. and are held at the Board offices at 239 Causeway Street, Boston. The Board welcomes invitations to meet at locations beyond the greater Boston area.

## Board Meeting Schedule

2000	July 12
	September 13
	November 8
2001	January 10
	March 14
	May 9

In addition to meetings of the full Board, the Nursing Education Committee and Complaint Committee meet regularly to conduct official business. These meetings are also open to the public.

## Nursing Education Committee Meeting Schedule

2000	September 20
	October 18
	December 6
2001	February 14
	April 4
	May 16
	June 27

The Complaint Committee meets once in the months when full Board meetings occur, and twice in the other months. These meetings are routinely scheduled on Wednesdays and Thursdays. Specific dates are posted on the Board's web site.

Anyone interested in attending any meeting of the Board or its Committees should contact the Board office or visit the Board's web site approximately one week before the meeting to confirm the exact time and place.

## New State Nursing Commission Hearings Begin

The Special Commission on Nursing and Nursing Practice held the first two of several public hearings in May and June. Established by law in 1999, the purpose of this legislative Commission is to "investigate and report on matters affecting the practice of nursing and the delivery of healthcare services by nurses." The Commission will gather information from healthcare providers, licensed and unlicensed personnel.

The Commission will hold four public hearings in the fall. Dates for the hearings will be posted on the Board's web site. The Board will submit testimony at one of these later meetings. The Commission must report its findings to the Legislature in December 2000.

## Volunteer Opportunities

Given the complexity of the issues before it, the Board has established various advisory committees, panels and task forces to assist with its work. These groups of nurse experts and, in some cases, public members, each address a specific area of nursing practice or education. They meet on a regular or ad hoc basis to research questions, to review Board regulations for currency and applicability, and to provide the Board with information and recommendations for action.

The Board is now seeking volunteers to serve as members on its Substance Abuse Rehabilitation Evaluation Committee and the Advanced Nursing Practice Advisory Panel. Terms of appointment are for two years, with the opportunity for re-appointment, for a maximum of six years. Anyone interested in being considered for appointment may call the Board office or visit the Board's web site for more detailed information. Those seeking appointment should send a letter of interest and a resume to the Board office. The letter should state which appointment you are seeking and the reasons you feel you are qualified.

**Office Hours**  
Monday through Friday  
9 a.m. to 5 p.m.  
**General Information**  
(617) 727-9961  
**Fax**  
(617) 727-1630  
**Web Site Address**  
[www.state.ma.us/reg/boards/rn](http://www.state.ma.us/reg/boards/rn)

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